

_____ Court of Washington, County/City of _____

Plaintiff

vs.

Defendant

SID: _____

DOB: _____

No. _____

Notice of Ineligibility to Possess a Firearm (NTIPF)

Clerk's Action Required: DOL and WSP

To the Defendant:

You have been convicted **OR** found not guilty by reason of insanity (NGRI) on *(date)* _____ of:

- possession under RCW 69.50.4011, 69.50.4013, 69.50.4014, or 69.41.030;
- the following crime/s committed against a family or household member or an "intimate partner" as defined by law at the time of the crime: Fourth Degree Assault Coercion Stalking Reckless Endangerment Criminal Trespass in the First Degree Violation of a Protection Order or No-Contact Order restraining the person or excluding the person from a residence Harassment committed on or after June 7, 2018;
- the following misdemeanor or gross misdemeanor crime/s not included above, and committed on or after July 23, 2023: Domestic Violence (RCW 10.99.020) Stalking Cyberstalking Cyber Harassment, excluding when committed solely pursuant to the element set forth in RCW 9A.90.120(1)(a)(i) Harassment Aiming or Discharging a Firearm (RCW 9.41.230) Unlawful Carrying or Handling of a Firearm (RCW 9.41.270) Animal Cruelty in the Second Degree committed under RCW 16.52.207(1) any "prior offense" as defined in RCW 46.61.5055(14) if committed within 7 years of a conviction for any other prior offense under RCW 46.61.5055; or
- a violation of the provisions of an order to surrender and prohibit weapons, an extreme risk protection order, or the provisions of any other protection order or no-contact order not included under RCW 9.41(a)(i) (B) or (E) restraining or excluding the person from a residence, committed on or after July 23, 2023.

You must **immediately surrender** all firearms and any concealed pistol license/s. **You may not possess, own, or have under your control** a firearm and under federal law any firearm or

ammunition or a concealed pistol license until your right has been restored. Violation of these laws is a felony pursuant to RCW 9.41.040.

This document has been read to the Defendant.

Dated: _____

Judge/Commissioner/Pro Tem

Defendant's Signature

Print Name:

[] A **copy** of the Defendant's driver's license or identicard is attached, **or**

Defendant's Name: (*last*) _____ (*first*) _____ (*middle*) _____

List any aliases: _____

Residential Street Address: _____

City: _____ State: _____ Zip: _____

Date of Birth (*month/day/year*): _____ Driver's License/ID #: _____

Race: _____ Sex: _____ Weight: _____ Height: _____ Eyes: _____ Hair: _____

Court NCIC #: _____

Submit to: Dept. of Licensing, Business & Professions Firearms Unit, firearms@dol.wa.gov,
(PO Box 9649, Olympia, WA 98507-9649) and Washington State Patrol Firearms Background
Check Program, fbdindices@wsp.wa.gov.